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Approved for use through 10/31/2002. OMB 065 1010 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION

IN01144 Attorney Docket No. Mark A. Laughlin First Inventor HIV-IMMUNE ADJUVANT THERAPY

TRANSMITTAL Express Mail Label No. EL403238311US (Only for new nonprovisional applications under 37 CFR 1.53(b))

| | TION ELEMENTS | | DRESS TO: Box Pa | tent Applica | |
|--|--|---------------------------|---|---|--------------------------|
| | erning utility patent application conte | nts. | | ngton, DC 20 | |
| Fee Transmittal F. Submit an original and a Applicant claims s See 37 CFR 1.27. Specification (preferred errangemen - Descriptive title - Cross Reference - Statement Regi - Reference to se or a computer - Background of - Brief Summary | orm (e.g., PTO/SB/17) duplicate für fee processing) mall entity status. [Total Pages 39] of the invention e to Related Applications arding Fed sponsored R & D quence listing, a table, rogram listing appendix the Invention of the Invention n of the Drawings (if filed) | 7. [8. Ni (# a. | CD-ROM or CD-R in du Computer Program (Ap ucleotide and/or Amino Acid f applicable, all necessary) Computer Readable F Specification Sequence Lis i. □ CD-ROM or CD-R ii. □ paper Statements verifying ACCOMPANYING AF Assignment Papers (c | pendix) Sequence S Form (CRF) sting on: (2 copies); identity of all | or bove copies ON PARTS |
| - Claim(s) - Abstract of the | | 10. | 37 CFR 3.73(b) States (when there is an assis | ment [| Power of Attorney |
| 4. Drawing(s) (35 U | .S.C. 113) [Total Sheets] | 11. | English Translation D | ocument (if | • • |
| 5. Oath or Declaration | [Total Pages 2] | 12. | Information Disclosure Statement (IDS)/PTO | | Copies of IDS Citations |
| a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 17 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76 | | 13. 14. 15. 16. | Preliminary Amendme Return Receipt Posto (Should be specifical) Certified Copy of Pric (if foreign priority is c | ent ard (MPEP y itemized) ority Docume laimed) | ĺ |
| 17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: | | | | | |
| Continuation | Divisional Continuation-in-part (| CIP) | of prior application No.: | | |
| i i | Prior application information: Examiner Group I Art Unit: | | | | |
| Box 5b, is considered a part of | ONAL APPS only: The entire disclosure the disclosure of the accompanying co relied upon when a portion has been in: | ntinuation or d | ivisional application and is he | reby incorpo | |
| 18. CORRESPONDENCE ADDRESS | | | | | |
| Customer Number or Bar Cod | e Label 24265 | | or Co. | rrespondence a | ddress below |
| Name | THOMAS D. HOFFMAN | Reg. No. | 28,221 | | |
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| City | | State | | Zip Code | |
| Country | | Telephone | (908) 298-5037 | Fax | (908) 298-5388 |
| Name (PrintlType) | THOMAS D. HOFFMAN | Re | gistration No. (AttorneylA | Agent) 2 | 28,221 |
| | 010 | 21. | | | |

Date March 8, 2001

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Date MARCH 2001

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

| TOTAL | AMOUNT (| OE D | AVMENT |
|-------|----------|------|--------|

(\$) 1466.00

| Compl t if Known | | |
|----------------------|----------------|--|
| Application Number | TO BE ASSIGNED | |
| Filing Date | MARCH 8, 2001 | |
| First Named Inventor | LAUGHLIN | |
| Examiner Name | TO BE ASSIGNED | |
| Group Art Unit | TO BE ASSIGNED | |
| Attorney Docket No. | IN01144 | |

| METHOD OF PAYMENT | FEE CALCULATION (continued) | | | |
|---|---|----------------|--|--|
| 1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: | 3. ADDITIONAL FEES | | | |
| indicated fees and credit any overpayments to: Deposit | Large EntitySmall Entity Fee | ee Paid | | |
| Account Number 19-0365 | Code (\$) Code (\$) | eeralu | | |
| Deposit | 105 130 205 65 Surcharge - late filing fee or oath | | | |
| Account Name Schering-Plough Corporation | 127 50 227 25 Surcharge - late provisional filing fee or cover sheet | | | |
| Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 | 139 130 139 130 Non-English specification | | | |
| Applicant claims small entity status. | 147 2,520 147 2,520 For filing a request for ex parte reexamination | | | |
| See 37 CFR 1.27 | 112 920° 112 920° Requesting publication of SIR prior to Examiner action | | | |
| 2. Payment Enclosed: Check Credit card Money Other | 113 1,840* 113 1,840* Requesting publication of SIR after Examiner action | | | |
| FEE CALCULATION | 115 110 215 55 Extension for reply within first month | | | |
| 1. BASIC FILING FEE | 116 390 216 195 Extension for reply within second month | | | |
| Large Entity Small Entity | 117 890 217 445 Extension for reply within third month | { | | |
| Fee Fee Fee Fee Description Gode (\$) Code (\$) Fee Paid | 118 1,390 218 695 Extension for reply within fourth month | | | |
| 101 710 201 255 Heilite Siling for | 128 1,890 228 945 Extension for reply within fifth month | | | |
| 106 320 206 160 Design filing fee | 119 310 219 155 Notice of Appeal | }i | | |
| 107 490 207 245 Plant filing fee | 120 310 220 155 Filing a brief in support of an appeal | | | |
| 108 710 208 355 Reissue filing fee | 121 270 221 135 Request for oral hearing | | | |
| 114 150 214 75 Provisional filing fee | 138 1,510 138 1,510 Petition to institute a public use proceeding | | | |
| SUBTOTAL (1) (\$) 710.00 | 140 110 240 55 Petition to revive - unavoidable | | | |
| | 141 1,240 241 620 Petition to revive - unintentional | | | |
| 2. EXTRA CLAIM FEES | 142 1,240 242 620 Utility issue fee (or reissue) | | | |
| Extra Claims below Fee Paid | | | | |
| Total Claims 49 -20** = 29 X = \$522.00 | 144 600 244 300 Plant issue fee | | | |
| Claims | 122 130 122 130 Petitions to the Commissioner 123 50 123 50 Petitions related to provisional applications | | | |
| Multiple Dependent | | | | |
| Large Entity Small Entity | 126 240 126 240 Submission of Information Disclosure Stmt | | | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) | 581 40 581 40 Recording each patent assignment per property (times number of properties) | | | |
| 103 18 203 9 Claims in excess of 20 | 146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a)) | | | |
| 102 80 202 40 Independent claims in excess of 3 | 149 710 249 355 For each additional invention to be | | | |
| 104 270 204 135 Multiple dependent claim, if not paid | examined (37 CFR § 1.129(b)) | | | |
| 109 80 209 40 ** Reissue Independent claims over original patent | 179 710 279 355 Request for Continued Examination (RCE) | | | |
| 110 18 210 9 ** Reissue claims in excess of 20 and over original patent | 169 900 169 900 Request for expedited examination of a design application | | | |
| SUBTOTAL (2) (\$) 756.00 | Other fee (specify) | | | |
| **or number previously paid, if greater; For Reissues, see above | Reduced by Basic Filing Fee Paid SUBTOTAL (3) | | | |
| SUBMITTED BY Complete (if applicable) | | | | |
| Name (PrintlType) THOMAS D. HOFFMAN | Registration No. (Attorney/Agent) 28,221 Telephone (908) 298-50 | 37 | | |
| Signature Thomas D HOLA | 3/8/2011 Date MARCH 8, 2 | 2001 | | |

| CERTI | CATE OF MAILING |
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| I hereby certify that this correspondence is being denvelope addressed to: Assistant Commissioner for | eposited with the United States Postal Service <u>as first class mail in an</u> r Patents, Washington, D.C. 20231 on this date: |
| Typed or printed name | |
| Signature | Date |